WATER/SANITATION SERVICE AGREEMENT (CONTINUING SERVICE/NAME CHANGE) Print or type except for signatures

This document is an application	n for a water/sanitation service contract between the customer(s) listed below and
	and shall become a contract upon acceptance by said Water Works.
I (WE)	, located at,
Ogden Dunes, IN, request water	r/sanitation service beginning, at said location and agree to be
bound by the terms and condition	ons hereinafter set forth.
I (WE) am/are employed by	
The property to be serviced is o	owned by
And I (WE) are the owner(s), c	ontract purchaser(s), or tenant(s). (CIRCLE ONE)
Title to said property (is) (is no	t) in trust. (CIRCLE ONE)
IN RECEIPT OF SUCH SERV	TCE, I (WE) agree to pay all water/sanitation bills incurred at this property
within ten (10) days of receipt a	and understand that there is no grace period and
I (WE) also agree as follows:	
1. To abide by all Water W	Vorks/Sanitation Department rules and regulations;
	he Water Works/Sanitation Department upon moving or change of possession
	l water/sanitation services incurred;
	er Works/Sanitation Department employees, to the premises at any reasonable
time; for purpose of ma	
4. To agree that the water:	meter is the property of the Water Works.
	accessible for reading and repairs at all times.
PLEASE RETURN TO:	
115 Hillcrest Road	Customer's signature, telephone(s), email address, and date
Ogden Dunes, IN 46368	oustomer's signature, telephone(s), email address, and date
- Burn 2 miles, 11 (10200	
	Billing address if different than above
IF AROVE IS COMDI	ETED DV TEN ANTSCS OWNED MISS COMPLETE DELOW
II ADOVE IS COM	LETED BY TENANTS(S), OWNER MUST COMPLETE BELOW
The undersigned,	, hereby certifies that he/they/is/are the legal
Owner(s) of the real estate locar	
such legal owner(s), he/they agr	
	de above hereof has been completed by the lawful tenant(s) of said real estate;
2. That the application made undersigned;	de above hereof has been completed with approval and concurrence of the
O ,	demnifies the Ogden Dunes Water Works/Sanitation Department for any loss
that may result from no	n-payment of water/sanitation bills occasioned by the approval of the
application made above:	
	ins in the application made above and agrees to be bound by the provisions
therein.	Ti de de de de de provibionis
O	wner(s) signature, telephone(s), email address, and date
	* * * * * * * * * * * * * * * * * * * *
_	yyman(a) a ddua a
0	wner(s) address
Accepted by/Date	

Revised 2-18-15 MC